

## STATE OF IOWA

CHESTER J. CULVER, GOVERNOR PATTY JUDGE, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES
KEVIN W. CONCANNON, DIRECTOR

## **INFORMATIONAL LETTER NO. 658**

December 5, 2007

**TO:** All Iowa Medicaid Hospital, Physician, Dentist, Podiatrist, Optometrist,

Optician, Pharmacy, Home Health Agency, Independent Lab, Ambulance, Medical Supply, ESRD Clinic, RHC, Chiropractor, Audiologist, SNF, Rehab Agency, ICF, Community Mental Health Center, Mental Hospital, Community Based ICF/MR, Psychologist, Hearing Aid Dealer, Orthopedic Shoe Dealer, Ambulatory Surgical Center, CRNA, Hospice, Clinical Social

Worker, FQHC, Nurse Practitioner and Nursing Facility-Mental ILL

Providers

**ISSUED BY:** Iowa Department of Human Services, Iowa Medicaid Enterprise

**RE:** Completion of Cross-Over Claims

**EFFECTIVE**: Immediately

The Iowa Medicaid Enterprise (IME) has encountered processing issues for Medicare cross-over claims. "Cross-over claims" are claims sent to the IME after they were already paid (primary) by a Medicare carrier but some Medicaid payment eligibility still remains (typically, this means Medicaid covers a Medicare coinsurance or deductible for a member who is "dual-eligible" for both Medicare and Medicaid).

As with claims submitted directly to IME, please make sure to include the following information on cross-over EOBs so we can determine exactly how to process your claim at IME. Treating/rendering providers who are part of a group at Iowa Medicaid should bill using their billing NPI number.

- Billing level NPI as verified with IME
- Billing level taxonomy code as verified with IME
- A qualifier should be placed in front of the taxonomy code as follows:
  - o For claims billed to Medicare on the CMS-1500 claim form, enter "ZZ"
  - o For claims billed to Medicare on the UB-04 claim form, enter "B3"
- The billing level zip code, as verified with IME (with or without a hyphen; 5 or 9 digits)
- The Iowa Medicaid Member ID

Below is an example of what should be included on the EOB submitted to IME for a CMS-1500 claim paid by Medicare:

Billing NPI	1234567899
Billing Taxonomy	ZZ111N00000X
code	
Billing Zip	512365477
Member ID	1234566E

**HMO** (**Part C**) billers: please note that this is <u>additional</u> information that pertains to <u>all</u> cross-over claims and does <u>not</u> replace instructions issued previously in Informational Letter #638 ("Medicare HMO Paper Cross-overs").

IME encourages providers to use the web portal to check claim status. Please allow four weeks processing time from the date Medicare issues payment (and remarks that the claim has been forwarded to IME) before submitting a cross-over claim on paper to IME. If the web portal status on the claim is "suspended," contact Provider Services to ensure all information is on file at the IME to process this claim.

The IME appreciates your partnership as we work together to serve the needs of Iowa Medicaid members. If you have any questions, please contact IME Provider Services at 1-800-338-7909, locally at 515-725-1004 or by e-mail at: <a href="mailto:imeproviderservices@dhs.state.ia.us">imeproviderservices@dhs.state.ia.us</a>.